



DEPARTMENT OF THE NAVY

NAVAL WEAPONS STATION YORKTOWN
P.O. DRAWER 160
YORKTOWN, VA 23691-0160

WPNSTA YORKTOWNINST 1040.1C

CCC

22 Apr 02

WPNSTA YORKTOWN INSTRUCTION 1040.1C

From: Commanding Officer, Naval Weapons Station Yorktown

Subj: NAVAL WEAPONS STATION YORKTOWN STRUCTURE AND DUTIES OF
THE COMMAND RETENTION TEAM (CRT), COMMAND APPRECIATION
PROGRAM FOR REENLISTEES, AND REQUEST TO REENLIST

Ref: (a) Retention Team Manual (NAVPERS 15878)
(b) Enlisted Transfer Manual (NAVPERS 15909)
(c) Naval Military Personnel Manual (NAVPERS 15560)
(d) Navy Enlisted Manpower and Personnel Certification
Manual (NAVPERS 18068D)

Encl: (1) Naval Weapons Station Yorktown Reenlistment
Interview Sheet
(2) Naval Weapons Station Yorktown Reenlistment
Information Sheet
(3) Oath of Enlistment
(4) NAVPERS 1306/7 (Enlisted Personnel Action Request)

1. Purpose

a. To prescribe policy, establish procedures, and assign responsibilities for Naval Weapons Station Yorktown (WPNSTA Yorktown) Command Retention Team (CRT).

b. To use a standard request reenlistment package ensuring all required documents are provided for the service member.

c. To set up a Command Appreciation Program for personnel reenlisting at WPNSTA Yorktown.

2. Cancellation. WPNSTA YORKTOWNINST 1040.1B

3. Background. Reference (a) sets the duties and responsibilities of the CRT structure. References (b) through (d) provide guidelines and proper procedures for carrying out the duties of the CRT.

22 Apr 02

4. Objectives

a. Obtain personnel stability through the retention of top quality personnel in proper balance and required numbers.

b. Provide continuing career guidance so individuals best develop and use their talents while serving in the United States Navy.

c. Provide a means of increasing good will and respect for the Navy for those service members leaving the service thereby returning an "ambassador" for the Navy to the civilian community.

d. Provide a method by which members being separated will be influenced to actively participate in the Naval Reserves.

5. CRT Organization. The CRT consists of:

a. Commanding Officer

b. Executive Officer

c. Command Master Chief

d. Command Career Counselor/Retention Program Manager

e. All Chief Petty Officers

6. Responsibilities of the CRT:

a. Commanding Officer

(1) Pursue an effective retention program.

(2) Actively involve every level of the Command.

(3) Assure proficiency and motivation of the team.

(4) Ensure only qualified personnel are recommended for reenlistment.

b. Executive Officer

(1) Monitor the degree of involvement, motivation, and attitude of the CRT members.

22 Apr 02

(2) Ensure communication access is available for Command Career Counselor.

(3) Make sure the Commanding Officer's policies are maintained and followed.

(4) Assure timely flow of administrative items.

c. Command Master Chief

(1) Require senior petty officers take an active interest in promoting career information awareness.

(2) Work closely with the Command Career Counselor to support the CRT.

(3) Be knowledgeable of retention programs and policies and participate in meeting retention objectives.

(4) Keep the Command Career Counselor informed of any matters of policies that affect retention.

d. Command Career Counselor

(1) Organize and manage an effective CRT.

(2) Inform the CRT of situations, which have an impact (positive or negative), on retention.

(3) Maintain retention statistics.

(4) Maintain a tickler for counseling interviews.

(5) Ensure all interviews are conducted in a timely manner.

7. Reenlistments. The reenlistment package, enclosures (1) and (2) along with a request chit, endorsed by the Command will be utilized for all reenlistments. This will ensure that all required documents are with the package and available for signature during the approval stage. The reenlistment package shall be submitted at least 45 days before the reenlistment date. The CRT will route the reenlistment package as follows:

a. The Command Career Counselor shall provide the service member with the reenlistment package and assure that his/her immediate chain of command process the package in a timely

22 Apr 02

manner.

b. The Command Career Counselor shall initial the package and sign all forms that require signature. If required, he/she shall type out and insert the spouse and/or dependent certificate of appreciation for the Commanding Officer's signature. Upon completion of this, the Command Career Counselor will forward the package to the Command Master Chief's office.

c. The Command Master Chief will initial the package and sign all documents that require signature. If required, he/she will forward the spouse's and/or dependents' certificate of appreciation to the Commanding Officer for signature. The Command Master Chief will then forward the reenlistment package to the Commanding Officer via the Executive Officer for final approval.

d. The Command Career Counselor will make arrangements for the photographer and ensure all appropriate certificate(s) of appreciation are on hand for the ceremony. If a Selective Reenlistment Bonus (SRB) is involved, the Command Career Counselor shall maintain liaison with Personnel Support Detachment (PSD) and Disbursing to assure the SRB check is available and ready for pickup before the ceremony. The Command Career Counselor will inform all personnel who are invited to attend the ceremony at least 1 week in advance to facilitate any adjustment of their schedule.

8. Command Appreciation Program for Reenlistees

a. Purpose. To provide personnel who reenlist onboard WPNSTA Yorktown special benefits for their contribution to the Naval Service.

b. Benefits. The following is a list of benefits that will be awarded to members who reenlist onboard WPNSTA Yorktown:

(1) 4-day liberty authorized by the Commanding Officer. This liberty will be taken over a weekend and will not be taken during a duty day.

(2) 3-day liberty authorized by the individual's supervisor. This liberty will not be taken in conjunction with the 4-day liberty or during a duty day.

(3) A Naval Weapons Station "Benie Book" with onboard benefits sponsored by MWR.

9. NAVPERS 1306/7. Per reference (b), NAVPERS 1306/7's (Enlisted Personnel Action Request) is to be used for any program, school, reassignment or special duty for which a particular requesting format is not already specified. All NAVPERS 1306/7's will be completed in the final format by the Command Career Counselor and sent to the proper departments of the Navy Personnel Command (NAVPERS) via the Commanding Officer, WPNSTA Yorktown. To ensure all NAVPERS 1306/7's are processed promptly, these guidelines shall be followed:

a. After determining a member's eligibility for a specific program, per references (b) and (c), complete the front of enclosure (4) and route through the CRT for approval/disapproval.

b. Ensure the member is scheduled for any physical examinations, if applicable.

c. Once the 1306/7 is fully endorsed by the Commanding Officer, the Command Career Counselor shall send the original and one copy to NAVPERS, and one copy will be kept on file at WPNSTA Yorktown.

10. Navy Enlisted Classification (NEC) and School Requests. Reference (d) outlines the requirements for obtaining primary and secondary NEC's. Upon Command Career Counselor's determination for eligibility, a special request chit shall be routed through the chain of command for approval/disapproval. All approved chits will be sent to PSD for proper action. The Administration Department will draft orders for schools as required.


K. L. SKUDIN

Distribution:
List I (Case A)

22 Apr 02

NAVAL WEAPONS STATION YORKTOWN
REENLISTMENT INTERVIEW SHEET

NAME _____ RANK/RATE _____
SSN _____ BRANCH: USN USNR
CURRENT COMMAND _____ UIC: _____
WORK PHONE _____ EAOS _____
REENLISTMENT DATE _____ YEARS REENLISTING _____
GUARD III () STAR () SRB: RATE () NEC () TAR ()
SELL LEAVE: YES () NO () HOW MANY DAYS ____ CARRY LEAVE: YES () NO ()
REENLISTING OFFICER (COMPLETE NAME) _____
RANK/USN/USNR _____ OFFICIAL TITLE _____

IN ACCORDANCE WITH MILPERSMAN 1050150, I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO SCHEDULE MY PHYSICAL EXAMINATION OR MEDICAL RECORD SCREENING PRIOR TO MY REENLISTMENT DATE. I MUST PROVIDE PSD WITH THE COMPLETED MEDICAL SCREENING FORM PRIOR TO MY REENLISTMENT DATE.

This statement is provided in compliance with the provisions of the Privacy Act of 1974 (PL 93-579) which requires that Federal agencies must inform individuals who are requested to furnish information about themselves as to the following facts concerning the information requested.

1. AUTHORITY: Title 10 and 37 USC.
2. PRINCIPLE PURPOSES: To advise the Reenlistment/Separation section of the member's desires concerning his/her reenlistment or separation.
3. MANDATORY OR VOLUNTARY DISCLOSURE: Mandatory Reenlistment or separation processing cannot be completed without requested information.

Member's Signature_____
Date

WPNSTA YORKTOWNINST 1040.1C

22 Apr 02

NAVAL WEAPONS STATION YORKTOWN
REENLISTMENT INFORMATION SHEET

NAME: _____ RANK/RATE: _____

SSN: _____ BRANCH: USN USNR

PHONE: _____ TERM OF REENLISTMENT _____ YEARS

REENLISTMENT DATE & TIME: _____ / _____ LOCATION: _____

UNIFORM: _____ UNIFORM FOR GUESTS ATTENDING: _____

SRB ELIGIBLE: YES/NO

REENLISTING OFFICER: _____

WILL SPOUSE ATTEND: YES/NO SPOUSE'S FULL NAME: _____

WILL ANY GUESTS ATTEND: (Give brief description of guests, dependent, retired officer, etc...)

IS MEMBER DUE ANY AWARDS THAT CAN BE PRESENTED DURING THE CEREMONY:
YES/NO

CO: _____

XO: _____

CMDMC: _____

LCPO: _____

CCC: _____

Enclosure (2)

OATH OF ENLISTMENT

I, (STATE YOUR NAME), DO SOLEMNLY
SWEAR (OR AFFIRM) ---THAT I WILL SUPPORT
AND DEFEND --- THE CONSITUTION OF THE
UNITED STATES --- AGAINST ALL ENEMIES,---
FOREIGN AND DOMESTIC;--- THAT I WILL
BEAR TRUE FAITH --- AND ALLEGIANCE TO
THE SAME,--- AND THAT I WILL OBEY --- THE
ORDERS OF THE PRESIDENT OF THE UNITED
STATES --- AND THE ORDERS OF THE
OFFICERS APPOINTED OVER ME ---
ACCORDING TO REGULATIONS --- AND THE
UNIFORM CODE OF MILITARY JUSTICE.--- SO
HELP ME GOD.--- I SWEAR (OR AFFIRM) ---
THAT I AM FULLY AWARE --- AND FULLY
UNDERSTAND --- THE CONDITIONS UNDER
WHICH I AM ENLISTING.

ENLISTED PERSONNEL ACTION REQUEST
NAVPERS 1306/7 (REV. 10-78) S/N 0106-LF-013-0636

DATE	34	SSN
------	----	-----

FROM:

DO NOT WRITE IN THIS SPACE

TO:

VIA:

DUTY PHONE (AUTOVON)

REF:

HOME PHONE

ENCL:

REQUESTED ACTION	<input type="checkbox"/> TYPE DUTY	<input type="checkbox"/> TOUR ADJUSTMENT	<input type="checkbox"/> CHANGE OF RATE	<input type="checkbox"/> EXTENSION/REENLISTMENT	<input type="checkbox"/> SCHOOL	<input type="checkbox"/> STAR	<input type="checkbox"/> SCORE	<input type="checkbox"/> SPECIAL PROGRAM
	<input type="checkbox"/> OTHER: (TRANSFER, EXCHANGE OF DUTY, NEW CONSTRUCTION, ETC.)							
	DESIRED TIME FRAME	EARLIEST:			LATEST:			
	CHOICES: 1ST (TYPE/AREA)		2ND (TYPE/AREA)		3RD (TYPE/AREA)			
	REASON FOR REQUEST/AMPLIFYING INFORMATION/OTHER REQUEST:							
	PRIOR TO TRANSFER TO DUTY REQUESTED I WILL ACQUIRE NECESSARY OBLIGATED SERVICE. <input type="checkbox"/> YES <input type="checkbox"/> NO							
	IF COST TRANSFER IS NOT FEASIBLE I WILL ACCEPT TRANSFER AT NO COST TO THE GOVERNMENT. <input type="checkbox"/> YES <input type="checkbox"/> NO							
	DO YOU HAVE ANY OTHER REQUESTS PENDING ACTION IN BUPERS, E.G., FLEET RESERVE, HUMS, SCHOOLS, ETC., <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, EXPLAIN ON THE REVERSE SIDE.							
	HAVE YOU PREVIOUSLY SUBMITTED THIS REQUEST <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, EXPLAIN ON REVERSE SIDE.							
	PRIVACY ACT STATEMENT: The authority to request this information is contained in 5 USC 301 Departmental Regulations. The principal purpose of the information is to enable you to make known your desires for the various types of duty listed, or some other special assignment consideration. The information will be used to assist officials and employees of the Dept. of the Navy in determining your future duty assignment. Completion of the form is mandatory except for duty and home phone numbers; failure to provide required information may result in delay in response to or disapproval of your request.							
INDIVIDUAL PERFORMANCE DATA	Signature:							
	NO. OF DEPNS.	LOCATION OF DEPNS.	LOCATION OF HHG	EDUCATION	CITZ	CLEARANCE/BASIS	FLAT	
	If last two evaluations were E4 or below enter marks:							
	DATE	PROF PERFORMANCE	MIL. BEHAVIOR	LDRSHIP & SUPV.	MIL. APPEARANCE	ADAPTABILITY		
CO'S ENDORSEMENT	FROM: DATE: _____							
	TO:				PERS OFFICE PHONE: _____			
	VIA:							
	<input type="checkbox"/> YES	<input type="checkbox"/> NO	ELIGIBLE FOR DUTY REQUESTED					
	<input type="checkbox"/> YES	<input type="checkbox"/> NO	RELIEF REQUIRED _____ MONTHS GAP ACCEPTABLE					
	<input type="checkbox"/> YES	<input type="checkbox"/> NO	MEETS SECURITY CLEARANCE REQUIREMENTS <input type="checkbox"/> N/A					
	<input type="checkbox"/> YES	<input type="checkbox"/> NO	SECNAVFINO REQUIRED					
	<input type="checkbox"/> YES	<input type="checkbox"/> NO	HAS CLEAR RECORD (NO NJP) FOR PAST _____ MONTHS AS REQUIRED					
	<input type="checkbox"/> YES	<input type="checkbox"/> NO	RECOMMENDED					
	USE REVERSE IF COMMENT DESIRED:							
MEMBER'S UIC:		SIGNATURE OF COMMANDING OFFICER:						

FIGURE 2B-1

NAVPERS 1306/7 (REV. 10-78) (BACK)

BUPERS USE ONLY	<input type="checkbox"/> APPROVED
	<input type="checkbox"/> ORDERS WILL BE ISSUED FOR TRANSFER IN <input type="checkbox"/> MEMBER AUTHORIZED TO EXTEND ENLISTMENT TO _____ <input type="checkbox"/> MEMBER AUTHORIZED TO REENLIST FOR _____ YEARS <input type="checkbox"/> PRD ADJUSTED TO _____ <input type="checkbox"/> MEMBER WILL BE ASSIGNED ON A TEMADDINS/PCS BASIS TO _____ SCHOOL <input type="checkbox"/> CLCVN _____ BY SEPAC <input type="checkbox"/> OTHER _____
	<input type="checkbox"/> DISAPPROVED (LETTER OF EXPLANATION ATTACHED)
	<input type="checkbox"/> RETURNED WITHOUT ACTION
	<input type="checkbox"/> MEMBER NOT ELIGIBLE FOR DUTY REQUESTED <input type="checkbox"/> REQUEST NOT IN COMPLIANCE WITH _____
ADDITIONAL INFORMATION:	
<div style="display: flex; justify-content: space-between;"> <div>DATE:</div> <div>SIGNATURE:</div> <div>PERS NO</div> </div>	

USE THIS SPACE FOR ADDITIONAL COMMENTS

★ U.S. Government Printing Office: 1985-505-012/25107 2-1

ORIGINATORS RETURN ADDRESS

FIGURE 2B-2

ENLISTED TRANSFER MANUAL
(NAVPERS 15909E)

2-8